



WISCONSIN

DEPARTMENT OF WORKFORCE DEVELOPMENT
Division of Workforce Solutions
Bureau of Work Support Programs

**TO: Economic Support Supervisors
Economic Support Lead Workers
Training Staff
Child Care Coordinators
W-2 Agencies**

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BOWS OPERATIONS MEMO

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Non W-2 ☒ **W-2** ☐ **CC** ☐

PRIORITY: High

SUBJECT: PACE & PARTNERSHIP PROGRAMS
1. ENROLLEES WHO LIVE IN ADULT FAMILY HOMES
2. DIVESTMENT

CROSS REFERENCE: Operations Memos 00-79 (Long Term Care), 00-80 (Community Waivers and SSI in CARES), 00-81 (Family Care), and 00-82 (PACE & Partnership)

EFFECTIVE DATE: July 3, 2000

SPECIAL NOTE

This memo applies to **Dane, Milwaukee, Eau Claire, Dunn** and **Chippewa** counties.

Effective April 1, 2001, PACE operates in Milwaukee County, while Partnership operates in Milwaukee, Dane, Eau Claire, Dunn and Chippewa counties.

PURPOSE

This memo provides:

1. Instructions on how to enter living arrangement information and calculate cost shares for PACE/Partnership enrollees who reside in an Adult Family Home (AFH)
2. Clarifies policy and processing for PACE/Partnership applicants or recipients who have divested

BACKGROUND

CARES has been modified to determine PACE/Partnership community waiver eligibility and to send an enrollment record to MMIS. PACE/Partnership involves several policies that are different from regular waiver program policies and processing. Operations Memo (OM) 99-98, with an effective date of 12/22/99, established that PACE/Partnership clients in community based residential facilities (CBRFs) would be treated as residents of an institutional setting for the purpose of calculating cost share.

OM 00-82 explains the changes that were effective 7/3/2000. Please refer to 00-82 and any subsequent enrollment OMs for more specific information about PACE/ Partnership policy and processing.

PACE/PARTNERSHIP RECIPIENTS RESIDING IN AN AFH WILL HAVE A COST SHARE DETERMINED ACCORDING TO INSTITUTIONAL LOGIC

AFH residents enrolled in PACE/Partnership must be processed in CARES as if they were living in a nursing home. The Medical Assistance (MA) eligibility and cost share for these individuals will be based on MA institution (categorically and medically needy) eligibility policies. The cost share will be calculated like a nursing home patient liability and will be paid to the PACE/Partnership organization.

Affected cases must be **identified and processed** for current and past months **within 30 days** of receiving this OM.

The change in cost share amount will be effective according to adverse action logic with proper notice. The increase in cost share for past months should not be considered an overpayment.

The following chart describes treatment of various living arrangements for PACE/Partnership enrollees.

ANLA Code	Living Arrangement Type	
01	Home or Apartment	Cost share - for Waiver Groups [A,]* B, or C.
25	Residential Care Apartment Complex (RCAC)	Cost share - for Waiver Groups [A,]* B, or C.
08	Nursing Home	\$65 monthly allowance per institutional logic + other allowable deductions such as guardianship fees and health insurance premiums. (does not apply to SSI recipients if they are SSI/Waiver Group A*)
23	Community Based Residential Facility (CBRF)	\$65 monthly allowance per Institutional logic + other allowable deductions.
24	Adult Family Home (AFH)	Same as CBRF
* \$00.00 cost share for Waiver Group A		

If living arrangement type 24 is entered on ANLA for a PACE or Partnership case, screen ANII will not allow an entry ("*BFO-Change the living arrangement type to institutional living arrangement*") edit message will appear on ANII). For a PACE or Partnership enrollee living in an AFH, an ANII entry is needed to identify institution type and initiate the institution logic in CARES. Until the system is adjusted to recognize an AFH living arrangement as institutionaliza-tion, follow these steps to build an MI-R (Partnership) or MI-P (PACE) assistance group (AG).

1. On ANLA enter Living Type 23 (CBRF) for persons residing in an AFH.
2. Complete ANII and use \$100.00 as the private pay daily rate for someone living in an AFH. AFH residents are entitled to a \$65.00 personal needs allowance (PNA) plus any other allowable deductions for insurance (AFMC) or guardian fees (AFSP).
3. Remove entries on AFSC and AFUC screens, since those in CBRF and AFH living arrangements are not currently entitled to allowance for maintaining their home or apartment. MI-R or the MI-P AGs will be built for these cases.

EXCEPTION: If the client has or is eligible for Food Stamps (FS), contact the DES CARES Information & Problem Resolution Center (see Contact). That "Call Center" will help you resolve individual cases involving FS and PACE/Partnership.

LEVEL OF CARE CHANGE

The level of care entered on ANCW affects the capitation payment to the PACE/Partnership Organization. When the PACE/Partnership organization reports a level of care change that has been approved by BQA, make the following changes to CARES:

1. Tran to ANCW
2. Enter the "begin MMY" field with the month in which the level of care change occurred.
3. In the program start date field, enter the date for which the level of care is effective. The PACE/Partnership organization will provide that date to the ES worker. Retroactive dates can be entered in this field.

Modification of LOC enrollment data is not affected by adverse action if an enrollee is staying in the same program.

4. Enter the new PACE/Partnership level of care.
5. Run SFED and confirm.

The program start date and level of care entered on ANCW will be sent through the MMIS interface and updated at EDS. It is not necessary to run with dates because the program start date, as entered, is sent to MMIS.

DIVESTMENT INSTRUCTIONS

Like other long term care MA programs, PACE and Partnership are subject to divestment law. Persons who divest are ineligible for PACE/ Partnership for the duration of the identified penalty

period. To fail PACE/Partnership for AFH residents who have divested, close PACE/Partnership manually in CARES.

1. If you enter a divestment on screens AAAQ and AAAT, check the budget screen EEAD to see if a divestment penalty applies to current eligibility.
2. If so, tran back to ANCW and end PACE or Partnership by changing the request for community waivers services from "yes" to "no".
3. Run SFED/SFEX to determine eligibility for other MA programs.
4. Send the customer a manual negative notice for PACE/Partnership waiver ineligibility and indicate the duration of the divestment penalty period.
5. Document in case comments (ACCC) the reason for the change on the PACE/Partnership request.

CONTACT

DES CARES Information & Problem Resolution Center

Email: carpolcc@dwd.state.wi.us
Telephone: 608-261-6317 (Option #1)
Fax: 608-266-8358

Note: Email contacts are preferred. Thank you.